08/17/2010 17:37

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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Health Care Association Political Action Committee 1201 L Street, NW ADDRESS (number and street) Check if different than previously DC 20005 Washington reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00006080 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 07 0 1 2010 07 3 1 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Leonard Russ Type or Print Name of Treasurer Electronically Filed by Mr. Leonard Russ 08 20 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 45

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name American Health Care Association Political Action Committee

D D " D 07 0 1 2010 07 3 1 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 128897.14 January 1 (b) Cash on Hand at 278729.64 Begining of Reporting Period ..... 57213.49 593895.99 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 335943.13 722793.13 6(a) and 6(c) for Column B) ..... 67800.00 454650.00 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 268143.13 268143.13 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 45

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period:

From: 0 7

01

2010

-<u>,</u>. |

м м 0 7 <sup>D</sup> 31

Y Y Y Y 2 0 1 0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		_
Than Political Committees (i) Itemized (use Schedule A)	52361.33	517155.90
(ii) Unitemized	4852.16	51740.09
(iii) TOTAL (add Lines 11(a)(i) and (ii)	57213.49	568895.99
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	10500.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	57213.49	579395.99
Transfers From Affiliated/Other     Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received     Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	14500.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	57213.49	593895.99
. Total Federal Receipts (subtract Line 18(c) from Line 19)	57213.49	593895.99

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

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II. DIS	BURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating E	xpenditures: —— I Federal/Non-Federal ————————————————————————————————————		
	(from Schedule H4)	0.00	0.00
(i) Fe	ederal Share		0.00
(ii) N	on-Federal Share	0.00	0.00
(b) Other I	Federal Operating	0.00	0.00
•	ditures	0.00	0.00
. ,	Operating Expenditures 1(a)(i), (a)(ii) and (b))	0.00	0.00
	Affiliated/Other Party		
Committees 3. Contribution	es to	0.00	0.00
Federal Car	ndidates/Committees	67450.00	453050.00
and Other F 4. Independen			
use Sched	ule E)	0.00	0.00
Committees (use Sched	I Expenditures Made by Party (2 U.S.C. 441a(d)) ule F)	0.00	0.00
6. Loan Repay	ments Made	0.00	0.00
7. Loans Made	·	0.00	0.00
3. Refunds of	Contributions To:		
	uals/Persons Other Political Committees	350.00	1600.00
(b) Politica	l Party Committees	0.00	0.00
` '	Political Committees		
`	as PACs)	0.00	0.00
` '	contribution Refunds	350.00	1600.00
(add Li	nes 28(a), (b), and (c))		
Other Disbu	rsements	0.00	0.00
D. Federal Ele	ction Activity (2 U.S.C 431(20))		
` '	Federal Election Activity		
•	chedule H6)	0.00	0.00
(1) Fed	eral Share		
(ii) "Le	vin" Share	0.00	0.00
` '	Election Activity Paid Entirely ederal Funds	0.00	0.00
` '	ederal Election Activity (add 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbu	ursements (add Lines 21(c), 22,		
23, 24, 25,	26, 27, 28(d), 29 and 30(c))	67800.00	454650.00
	eral Disbursements		
	ine 21(a)(ii) and Line 30(a)(ii)	07000 00	15 1050 00
from Line 3	31)	67800.00	454650.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 45

	· , , , , , , , , , , , , , , , , , , ,		
	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3.	Total Contributions (other than loans) from Line 11(d), page 3)	57213.49	579395.99
84.	Total Contribution Refunds (from Line 28(d))	350.00	1600.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	56863.49	577795.99
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

## SCHEDULE A (FEC Form 3X)

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 45 (check only one)  X 11a 11b 11c 12 15 16
ny information copied from such Reports and for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association F	d Statements may not be sold or used by any persithe name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mary Baker		Date of Receipt
Mailing Address PO Box 1129		0 7 1 6 2 0 1 0
City	State Zip Code	Transaction ID: C952809
Turlock	CA 95381	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Mark One Corp.	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3750.00	
Full Name (Last, First, Middle Initial) Mack Baldridge		Date of Receipt
Mailing Address Southwest Nursing 8 5300 Alta Mesa Bou	levard	07 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C948357
Fort Worth	TX 76133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	220.00
Name of Employer Southwest Nursing & Rehab- ilitation	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) Cecil Barcelo		Date of Receipt
Mailing Address 411 Alabama Ave		07 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C952861
League City	TX 77573-2615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	282.50
Name of Employer Baywind Village	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	817.50	
NIDTOTAL of Descript This Boss (serious)	)	1752.50

## SCHEDULE A (FEC Form 3X)

ľ	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS  any information copied from such Reports and S	Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	e name and ad	dress of any political committee t	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Brad Barnes  Mailing Address 2615 Falcon Knoll Ln			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Katv	State TX	Zip Code	Transaction ID: C963375
	FEC ID number of contributing federal political committee.	C	77494-2419	Amount of Each Receipt this Period 500.00
	Name of Employer Green Acres of Baytown  Receipt For:  Primary General  Other (specify) ▼	Occupation Administration Aggregate		
— В.	Full Name (Last, First, Middle Initial) Brad Bedell Mailing Address 731 North Main	<u> </u>		Date of Receipt  0 7 0 2 2 0 1 0
	City	State	Zip Code	Transaction ID: C946902
	Sikeston	MO	63801-1210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Health Facilities Management ent Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Presider Aggregate		
_ C.	Full Name (Last, First, Middle Initial) Lyn Bentley			Date of Receipt
	Mailing Address 2212 Hidden Valley Lr	1		07 06 2010
	City	State	Zip Code	Transaction ID: C948365
	Silver Spring FEC ID number of contributing federal political committee.	MD C	20904-5240	Amount of Each Receipt this Period  20.00
	Name of Employer AHCA	Occupation Director,	on Regulatory	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	
	SUBTOTAL of Receipts This Page (optional)			1770.00
Γ.	FOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 45 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Health Care Association Pol	litical Action	Committee	
Full Name (Last, First, Middle Initial) Lyn Bentley			Date of Receipt
Mailing Address 2212 Hidden Valley Ln	1		07 / 27 / 2010
City	State	Zip Code	Transaction ID: C959939
Silver Spring	MD	20904-5240	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer AHCA	Occupatio		
Receipt For:		Regulatory	$\dashv$
Primary General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼		320.00	1
Full Name (Last, First, Middle Initial) Elizabeth Blankenship	1		Date of Receipt
Mailing Address PO Box 1017			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C954073
Heber Springs	AR	72543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Southridge Village Retire- ment Center	Occupatio Owner	n	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Timothy J Boyle			Date of Receipt
Mailing Address 600 Stevens Post Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C946903
Dakota Dunes	SD	57049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1666.66
Name of Employer Care Center Mgmt Co	Occupatio Chief Op	n erating Officer	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼	0 0	3333.32	
SUBTOTAL of Receipts This Page (optional)			2186.66

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Benorts a	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 45 (check only one)    X   11a
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)  American Health Care Association	g the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Patrick Provide
Douglas Burr  Mailing Address 1185 Wilde Run C	ourt	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: C946904
Roswell	GA 30075	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cypress Administrative Se- rvices, LLC	Occupation VP Finance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Teresa Cagnolatti		Date of Receipt
Mailing Address 10300 Strathmore	Hall St	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C953521
Rockville	MD 20852-3399	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer AHCA	Occupation Director, Govt Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) James A Carlson		Date of Receipt
Mailing Address 6026 SW Madison	Court	0 7 2 0 Y Y Y Y Y
City	State Zip Code	Transaction ID: C953522
<u>Portland</u>	OR 97221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Oregon Health Care Associ- ation	Occupation President/CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
		1750.00

## SCHEDULE A (FEC Form 3X)

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	24-4	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or	ny information copied from such Reports and Store commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Hugh Cassidy, Jr.			Date of Receipt
	Mailing Address Marrero Healthcare Co 5301 August Avenue	enter		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C952805
	Marrero FEC ID number of contributing federal political committee.	C	70072	Amount of Each Receipt this Period  228.05
	Name of Employer Marrero Healthcare Center	Occupation Administration	trator	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 228.05	
В.	Full Name (Last, First, Middle Initial) Karen H. Chadderton Mailing Address 4 Wagon Road			Date of Receipt  0 7 0 6 2 0 1 0
	City	State	Zip Code	Transaction ID: C946957
	Enfield	CT	06082-5639	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Riverside Health Rehabili- tation Receipt For:	Occupation Administration	trator	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 460.00	]
с. С.	Full Name (Last, First, Middle Initial) Gregory Chambery  Mailing Address 7 Sweets View Drive			Date of Receipt
				07 28 2010
	City Fairport	State NY	Zip Code 14450	Transaction ID: C958030  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14450	350.00
	Name of Employer Maplewood Nursing Home	Occupation Administration		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1350.00	
s	SUBTOTAL of Receipts This Page (optional) .	1		928.05
T,	OTAL This Period (last page this line number	only)		

or fo	vinformation copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association P Full Name (Last, First, Middle Initial) Donna Childress Mailing Address 1401 West Capitol A		son for the purpose of soliciting contributions to solicit contributions from such committee.
	American Health Care Association P Full Name (Last, First, Middle Initial) Donna Childress		
<u>-</u> 1	Donna Childress		
_	Mailing Address 1401 West Capitol A		Date of Receipt
(			07 12 7 2010
	City	State Zip Code	Transaction ID: C948438
_	Little Rock	AR 72201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Arkansas Health Care Asso-	Occupation Executive Director	
	<u>ciation</u> Receipt For:	Aggregate Year-to-Date ▼	<del>- </del>
	Primary General Other (specify) ▼	300.00	
<u> </u>	Full Name (Last, First, Middle Initial) Kathleen Collins Pagels		Date of Receipt
ı	Mailing Address 1440 East Missouri S	treet	0 7 D D / Y Y Y Y O D D / 2 0 1 0
	City	State Zip Code	Transaction ID: C946914
_	Phoenix	AZ 85014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
4	Name of Employer Arizona Health Care Assoc- iation	Occupation Executive Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	475.00	
	Full Name (Last, First, Middle Initial) Gregory J. Elliot		Date of Receipt
-	Mailing Address 240 Capitol Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: C953668
_	Charleston	WV 25301-2297	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	84.00
1	Name of Employer AMFM, Inc.	Occupation IT Coordinator	
Ī	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1084.00	
QII	IBTOTAL of Receipts This Page (optional)	1	509.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 45 (check only one)    X
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma le name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Health Care Association Po	olitical Action	Committee	
۸.	Full Name (Last, First, Middle Initial) Teresa Eyet			Date of Receipt
	Mailing Address 10009 Dallas Ave  City	State	Zip Code	0 7 0 6 2 0 1 0 Transaction ID: C948367
	Takoma Park	MD	20901-2240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20001 22-70	20.00
	Name of Employer AHCA	Occupation Director,	n Education	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	
	Full Name (Last, First, Middle Initial) Teresa Eyet Mailing Address 10009 Dallas Ave	<u> </u>		Date of Receipt
			<b>-</b>	07 27 2010
	City Takema Park	State MD	Zip Code	Transaction ID: C959941
	Takoma Park  FEC ID number of contributing federal political committee.	C	20901-2240	Amount of Each Receipt this Period  20.00
	Name of Employer AHCA	Occupation Director,	n Education	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	
 :.	Full Name (Last, First, Middle Initial) Susan Feeney			Date of Receipt
•	Mailing Address 7005 Metropolitan PI			0 7 0 6 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C948370
	Falls Church	VA	22043-2330	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.24
	Name of Employer American Health Care Asso- ciation	<del>- '</del>	sident, Public Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 307.60	
	SUBTOTAL of Receipts This Page (optional)	1		59.24

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each cat	te schedule(s) tegory of the mmary Page	FOR LINE NUMBER: PAGE 13 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Pol	name and address of any po	used by any person litical committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Susan Feeney			Date of Receipt
	Mailing Address 7005 Metropolitan PI			07 27 2010
	City Falls Church	State Zip Code VA 22043-23	20	Transaction ID: C959954
	FEC ID number of contributing federal political committee.	C 22043-23	30	Amount of Each Receipt this Period 19.24
	Name of Employer American Health Care Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President, Public Aggregate Year-to-Date		
- В.	Full Name (Last, First, Middle Initial) Lowell Feldman			Date of Receipt
	Mailing Address 163 West Kingsbridge  City	Hoad State Zip Code		0 7 1 6 2 0 1 0  Transaction ID: C952810
	Bronx	NY 10463		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1100.00
	Name of Employer Terrace Healthcare Center, Inc Receipt For: Primary Other (specify)	Occupation Administrator Aggregate Year-to-Date	1100.00	
_ C.	Full Name (Last, First, Middle Initial) John Fleischer			Date of Receipt
<b>o</b> .	Mailing Address 1689 Holdens Arbor Re	ın		0 7 2 7 2 0 1 0
	City Westlake	State Zip Code OH 44145		Transaction ID: C959137  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Howard, Wershbale and Co	Occupation CPA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	350.00	
	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	1469.24

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 45 (check only one)  X 11a 11b 11c 12
	nd Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Health Care Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Tripp Francis		Date of Receipt
Mailing Address 102 Woodchase Pa	ark Drive State Zip Code	0 7 1 6 2 0 1 0  Transaction ID: C952862
Clinton	MS 39056-4113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4000.00
Name of Employer Trinity Mission of Clinton LLC	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Tripp Francis Mailing Address 102 Woodchase Pa	and Drive	Date of Receipt
Mailing Address 102 Woodchase Pa	ark Drive	07 19 2010
City	State Zip Code	Transaction ID: C953667
Clinton	MS 39056-4113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Trinity Mission of Clinton LLC	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ♥	Aggregate Year-to-Date ▼  5000.00	
Full Name (Last, First, Middle Initial) Patricia Giorgio		Date of Receipt
Mailing Address 4702 Chestnut Rid	ge NE	07 07 2010
City	State Zip Code	Transaction ID: C947127
Cedar Rapids  FEC ID number of contributing federal political committee.	IA 52411	Amount of Each Receipt this Period  1875.00
Name of Employer Evergreen Estates	Occupation Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3125.00	
SUBTOTAL of Receipts This Page (option:	l)	6875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 45 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Personal Property of the Personal Proper	Statements may not be sold or used by any persone name and address of any political committee to political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Gomez Mailing Address 2201 K Street  City Sacramento	State Zip Code CA 95816-4922	Date of Receipt  M M O 7 D D C 2 D 1 D  Transaction ID: C946905  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer CA Association of Health Facilities  Receipt For:  □ Primary □ General Other (specify) ▼	Occupation President  Aggregate Year-to-Date  750.00	250.00
Full Name (Last, First, Middle Initial) Ronald Goux  Mailing Address 2045 Highway 59 PO Box 1429  City  Mandeville  FEC ID number of contributing federal political committee.  Name of Employer Gulf South Medical Enterprises  Receipt For: Primary General Other (specify)	State Zip Code LA 70448-1909  C  Occupation President  Aggregate Year-to-Date   1100.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Will Griffin  Mailing Address 430 Will Rogers Park  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Grace Living Centers  Receipt For: Primary General Other (specify)	State Zip Code OK 73108  C  Occupation COO  Aggregate Year-to-Date   1575.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 7 3 0 2 0 1 0  Transaction ID: C959798  Amount of Each Receipt this Period  1575.00
SUBTOTAL of Receipts This Page (optional)		2375.00

City State Zip Code Bloomington MN 55438  FEC ID number of contributing federal political committee.  Name of Employer Tealwood Care Centers Inc  Primary General Other (specify) ▼  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Parimary General Other (specify) ▼  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify) ▼  City Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  City Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  City Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  City State Zip Code And Advocacy  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  City State Zip Code And Federal Political committee.  Date of Receipt For: Primary General Other (specify) ▼  Date of Receipt Tips For The Primary General Other (specify) ▼  Date of Receipt Tips For The Primary General Other (specify) ▼  City State Zip Code Amount of Each Receipt Tips For Transaction ID: C959970  Amount of Each Receipt Tips For Transaction ID: C959970  Amount of Each Receipt Tips For Transaction ID: C959970  Amount of Each Receipt Tips For Transaction ID: C959970	Use separate schedule(s) for each category of the Detailed Summary Page	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 16 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A. Howard Groff  Mailling Address 11337 Louisiana Circle  City State Zip Code Bloomington MN 55438  FEC ID number of contributing federal political committee.  Name of Employer Tealwood Care Centers Inc  Receipt For: Primary General Occupation President PAICA  PEC ID number of contributing federal political committee.  Name of Employer Aggregate Year-to-Date ▼  Transaction ID: C946906  Amount of Each Receipt this F  Transaction ID: C946906  Amount of Each Receipt this F  Transaction ID: C946906  Transaction ID: C946906  Transaction ID: C946906  Transaction ID: C946906  Amount of Each Receipt this F  Transaction ID: C948385  Transaction ID: C948385  Amount of Each Receipt this F  Transaction ID: C948385  Transaction ID: C948385  Transaction ID: C948385  Amount of Each Receipt this F  Transaction ID: C948385  Transaction ID: C948385  Transaction ID: C948385  Amount of Each Receipt this F  Transaction ID: C948385  Transaction ID: C948	ne name and address of any political committee to s	or for commercial purposes, other than using the name and  NAME OF COMMITTEE (In Full)	for the purpose of soliciting contributions olicit contributions from such committee.
City State Zip Code Bioomington MN 55438  FEC ID number of contributing federal political committee.  Name of Employer AlCA Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  David Hebert AlCA Senior Vice President of Advocacy  Full Name (Last, First, Middle Initial)  David Hebert Alexandria  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  Full Name (Last, First, Middle Initial)  David Hebert Alexandria  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  Full Name (Last, First, Middle Initial)  David Hebert Alexandria  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  Full Name (Last, First, Middle Initial)  David Hebert Alexandria  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  City Aggregate Year-to-Date ▼  Transaction ID: C948385  Amount of Each Receipt this F  Transaction ID: C948385  Amount of Each Receipt this F  Cocupation Sanior Vice President of Advocacy  Amount of Each Receipt this F  Transaction ID: C959970  Amount of Each Receipt this F  Transaction ID: C959970  Amount of Each Receipt this F  Transaction ID: C959970  Amount of Each Receipt this F		Howard Groff	· · · · · · · · · · · · · · · · · · ·
Bloomington  MN 55438  FEC ID number of contributing federal political committee.  Name of Employer Tealwood Care Centers Inc  Receipt For:  Other (specify) ▼  Full Name (Last, First, Middle Initial)  David Hebert  Name of Employer AHCA  Receipt For:  Primary General  C State Zip Code  Aggregate Year-to-Date ▼  Transaction ID: C948385  Amount of Each Receipt this F  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt  Date of Receipt this F  Transaction ID: C948385  Amount of Each Receipt this F  Date of Receipt  Date of Receipt this F  Date of Receipt  Date o			07 02 2010
FEC ID number of contributing federal political committee.  Name of Employer Tealwood Care Centers Inc  Receipt For:  Primary General Other (specify) ▼	-	-	
Receipt For:     Primary	C	FEC ID number of contributing	1250.00
Primary	· '	Name of Employer Tealwood Care Centers Inc Presid	
Date of Receipt  Mailing Address 7605 Ridgecrest Drive  City State Zip Code Alexandria VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify) ▼  City State Zip Code Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) David Hebert  Mailing Address 7605 Ridgecrest Drive  City State Zip Code Alexandria VA 22308-1049  Date of Receipt  Transaction ID: C9549385  Amount of Each Receipt this F  Date of Receipt  Transaction ID: C959970  Amount of Each Receipt this F  Coty State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer Alexandria  Coty State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer Alexandria  Coccupation Senior Vice President of Advocacy Aggregate Year-to-Date ▼  Primary General  Coccupation Senior Vice President of Advocacy Aggregate Year-to-Date ▼  Primary General	3750.00	Primary General	
City State Zip Code Transaction ID: C948385  Alexandria VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify) ▼  City State Zip Code Mailing Address 7605 Ridgecrest Drive  City State Zip Code Transaction ID: C948385  Date of Receipt His F  Date of Receipt Mailing Address 7605 Ridgecrest Drive  City State Zip Code Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970  Amount of Each Receipt this F  C Transaction ID: C959970		David Hebert	╡ '
Alexandria  VA 22308-1049  Amount of Each Receipt this F  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For:  Primary General Other (specify) ▼  City State Zip Code Alexandria  FEC ID number of contributing federal political committee.  Name of Employer Alexandria  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For:  Occupation State Zip Code VA 22308-1049  Transaction ID: C959970  Amount of Each Receipt this F  C  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For:  Primary General  Amount of Advocacy  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼			07 06 2010
FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify) ▼  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Other (specify) ▼  City State Zip Code VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General Occupation Senior Vice President of Advocacy  Aggregate Year-to-Date ▼  Cocupation Senior Vice President of Advocacy  Aggregate Year-to-Date ▼	-	•	
Senior Vice President of Advocacy  Receipt For:     Primary    General     Other (specify) ▼		FEC ID number of contributing	Amount of Each Receipt this Period 38.47
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) David Hebert Mailing Address 7605 Ridgecrest Drive  City State Zip Code Alexandria VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General  General  615.30  Date of Receipt  M M M / D D D / Y Y Y / 2  Transaction ID: C959970  Amount of Each Receipt this F  C  Aggregate Year-to-Date  Aggregate Year-to-Date  F15.30			
David Hebert  Mailing Address 7605 Ridgecrest Drive  City  Alexandria  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For:  Primary  Primary  Primary  Primary  Date of Receipt  M M M / D D / Y Y Y 2 7 2 2 2 7 2 2 2 7 2 2 2 7 2 2 2 7 2 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 7 2 2 2 2 7 2 2 2 7 2 2 2 2 7 2		Primary General	
City State Zip Code Alexandria VA 22308-1049  FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For: Primary General  O 7 2 7 2  Transaction ID: C959970  Amount of Each Receipt this F			Date of Receipt
Alexandria  VA 22308-1049  Amount of Each Receipt this F  C  Name of Employer AHCA  Receipt For:  Primary  General  Amount of Each Receipt this F	е	Mailing Address 7605 Ridgecrest Drive	
FEC ID number of contributing federal political committee.  Name of Employer AHCA  Receipt For:  Primary General  C  Occupation Senior Vice President of Advocacy  Aggregate Year-to-Date ▼	·	•	
Name of Employer AHCA  Receipt For:  Primary  General  Occupation Senior Vice President of Advocacy  Aggregate Year-to-Date  General	VA 22308-1049	Alexandria VA	Amount of Each Receipt this Period
Receipt For:  Primary  General  Aggregate Year-to-Date  615.20	C	federal political committee.	38.47
Primary General 615.20	· ·	Name of Employer AHCA Occupa Senior	
		Primary General	
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)	1326.94

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Association Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) Richard Herrick		Date of Receipt
Mailing Address 33 Elk Street 300		07 12 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C948373
<u>Albany</u>	NY 12207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1575.00
Name of Employer NYS Health Facilities Ass- ociation	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3775.00	
Full Name (Last, First, Middle Initial) J David Hightower	1	Date of Receipt
Mailing Address 6936 North Lakewood		07 12 7 2010
City	State Zip Code	Transaction ID: C948718
Van Buren	AR 72956-8120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hopes Creek Retirement Li- ving	Occupation President/Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Robin L. Hillier		Date of Receipt
Mailing Address 22 Parrish Road		07 02 2010
City	State Zip Code	Transaction ID: C946907
Conneaut	OH 44030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer RLH Consulting	Occupation Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3750.00	
SURTOTAL of Receipts This Page (entional)	1	3325.00
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number	·	3325.0

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and State or for commercial purposes, other than using the name	ments may not be sold or used by any persone and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Health Care Association Political	al Action Committee	
Δ.	Full Name (Last, First, Middle Initial) Delta Holloway		Date of Receipt
	Mailing Address 1475 N Cole Rd		07 28 2010
	City	State Zip Code	Transaction ID: C958102
	Boise	ID 83704-8537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Western Health Care Corn	Occupation Consultant RN	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
- В.	Full Name (Last, First, Middle Initial) Jon Howell		Date of Receipt
	Mailing Address 334 Fountainhead Drive		07 16 2010
	City	State Zip Code	Transaction ID: C952806
	<u>Jefferson</u>	GA 30549	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1575.00
	Georgia Health Care Accoc-	Occupation State Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1575.00	
С.	Full Name (Last, First, Middle Initial) Norm Hyatt		Date of Receipt
	Mailing Address 5102 Scenic Dr		07 06 7 2010
	City <u>Yakima</u>	State         Zip Code           WA         98908-2229	Transaction ID: C948358  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	550.00
	Hyott Managamant Cara	Occupation President	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)		2475.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 45 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Health Care Association	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Jeff Jerebker  Mailing Address 12136 W Bayaud	Street		Date of Receipt
City <u>Lakewood</u> FEC ID number of contributing	State CO	Zip Code 80228-2115	Transaction ID: C959797  Amount of Each Receipt this Period
federal political committee.  Name of Employer Pinon Mgmt.  Receipt For:	Occupation CEO  Aggregate	n • Year-to-Date ▼	220.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	199.13	220.00	]
Richard Kase  Mailing Address 5125 Pine Rocklar	nds Avenue		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: C946908
<u>Lithia</u>	FL	33547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		333.33
Name of Employer Cypress Healthcare	Occupation Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.66	]
Full Name (Last, First, Middle Initial) Matthew Kern	•		Date of Receipt
Mailing Address 2560 Brunswick A			07 20 7 2010
City Golden Valley	State MN	Zip Code 55422-3371	Transaction ID: C953683  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33-722 007 1	875.00
Name of Employer The Goodman Group	Occupation Director	n of Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2100.00	
SUBTOTAL of Receipts This Page (option			1428.33

			<u> </u>
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 45 (check only one)
ITEMIZED RECEIPTS		for each category of the	
IT EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Health Care Association Po	litical Action	Committee	
Full Name (Last, First, Middle Initial) Matthew Kern			Date of Receipt
Mailing Address 2560 Brunswick Ave N	J		07 22 2010
City	State	Zip Code	Transaction ID: C958033
Golden Valley	MN	55422-3371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		875.00
Name of Employer The Goodman Group	Occupation Director	n of Operations	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General	1 1	2100.00	1
Other (specify) ▼		2100.00	
Full Name (Last, First, Middle Initial) David Kyllo			Date of Receipt
Mailing Address 4621 28th Road South	ı		07 06 YYYYY
City	State	Zip Code	Transaction ID: C948388
Arlington	VA	22206	Amount of Each Receipt this Period
FFC ID sumber of contribution			
FEC ID number of contributing federal political committee.	С		39.56
Name of Employer National Center for Assis-	Occupation		
ted Living	1	e Director	_
Receipt For:	Aggregate	e Year-to-Date	
Primary General	' '	622.06	1
Other (specify)	0 0	632.96	
Full Name (Last, First, Middle Initial) David Kyllo			Date of Receipt
Mailing Address 4621 28th Road South	ı		07 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C959998
Arlington	VA	22206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		39.56
Name of Employer National Center for Assis- ted Living	Occupation Executiv	n e Director	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General		200.00	1
Other (specify)		632.96	
SUBTOTAL of Receipts This Page (optional)			954.12

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 45 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Health Care Association Po	litical Action	Committee	
۷.	Full Name (Last, First, Middle Initial) Brian Lee			Date of Receipt
	Mailing Address 517 Overdale Road  City	State	Zip Code	0 7 0 7 2 0 1 0 Transaction ID: C948423
	Baltimore	MD	21229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Nexion Health Management, Inc.	Occupation Attorney	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
– В.	Full Name (Last, First, Middle Initial) Todd Mackenzie			Date of Receipt
	Mailing Address 24 Canyon Creek Driv	e 		07 02 7 2010
	City	State	Zip Code	Transaction ID: C946909
	Wimberley	TX	78676	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Remington Medical Resort of San Antoni	Occupation Chief Ex	on ecutive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
- ).	Full Name (Last, First, Middle Initial) Karen McCormack			Date of Receipt
	Mailing Address 209 N Beaver St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C947760
	York	PA	17401-5321	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Wilmac Corp	Occupation Presiden		
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 2850.00	1
Γ			_ v v v v v v v v	1
	SUBTOTAL of Receipts This Page (optional)		······	675.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 45 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		
Mailing Address 27 Brand Ave		Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C959800
<u>Faribault</u>	MN 55021-6411	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Pleasant Manor Inc	Occupation Social Services Dir	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) Rick Mendlen	L	Date of Receipt
Mailing Address 1810 Gillespie Way	у	0 7 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C946911
<u>El Cajon</u>	CA 92020-0921	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kennon S. Shea & Associat- es	Occupation COO	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) Richard Miller	L	Date of Receipt
Mailing Address 3611 Glenfield Ct		0 7 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C946910
Louisville	KY 40241-2513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer American Health Care Asso- ciation	Occupation Membership Liasion	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional	al)	835.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 45 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Cynthia Klisz Morton		Date of Receipt
Mailing Address 4609 Overbrook Ro	oad State Zip Code	0 7 0 6 2 0 1 0  Transaction ID: C948389
Bethesda  FEC ID number of contributing federal political committee.	MD 20816	Amount of Each Receipt this Period  38.47
Name of Employer American Health Care Association Receipt For:  Primary  Other (specify) ▼	Occupation VP, Political Affairs  Aggregate Year-to-Date   667.71	
Full Name (Last, First, Middle Initial) Cynthia Klisz Morton Mailing Address 4609 Overbrook Re	oad	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C960026
Bethesda	MD 20816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.47
Name of Employer American Health Care Asso- ciation	Occupation VP, Political Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 667.71	
Full Name (Last, First, Middle Initial) Steve Mulder	1	Date of Receipt
Mailing Address 7300 Del Pardo St	reet	07 16 2010
City	State Zip Code	Transaction ID: C954077
Boca Raton  FEC ID number of contributing federal political committee.	FL 33433	Amount of Each Receipt this Period 275.00
Name of Employer Whitehall Boca	Occupation Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	
SUBTOTAL of Receipts This Page (options	al)	351.94

9	SCHEDULE A (FEC Form 3X)		Llee concrete as had also (a)	FOR LINE NUMBER: PAGE 24 / 45		
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)		
	I LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12		
Γ	Any information copied from such Reports and Sta	atemente mo	y not be sold or used by any perso	13 14 15 16 17		
	or for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	American Health Care Association Politics	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Francesca Fierro O'Reilly			Date of Receipt		
	Mailing Address 4005 Nellie Custis Dr			07 06 YYYYY 2010		
	City	State	Zip Code	Transaction ID: C948390		
	Arlington	VA	22207-5107	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		20.00		
	Name of Employer AHCA	Occupatio Sr Direc	n tor of Congressional Affairs			
	Receipt For:		e Year-to-Date	-		
	Primary General	199.79		1		
	Other (specify) ▼		320.00			
- В.	Full Name (Last, First, Middle Initial) Francesca Fierro O'Reilly			Date of Receipt		
	Mailing Address 4005 Nellie Custis Dr			M M / D D / Y Y Y Y Y O D D / 27 2010		
	City	State	Zip Code	Transaction ID: C960027		
	Arlington	VA	22207-5107	Amount of Each Receipt this Period		
	FEC ID number of contributing					
	federal political committee.	C		20.00		
	Name of Employer AHCA	Occupatio	n tor of Congressional Affairs			
	Receipt For:		e Year-to-Date			
	Primary General	199.194.1	1 1 1 1 1 1 1	1		
	Other (specify) ▼	0 0	320.00			
- С.	Full Name (Last, First, Middle Initial) Tony E Oglesby			Date of Receipt		
<b>J</b> .	Mailing Address PO Box 350			M M / D D / Y Y Y Y Y O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O D O O O D O O O D O O O D O D O O D O D O O D O D O O D O D O O D O D O O D O D O O D O O D O D O O D O D O D O O D O D O D O D O D O D O D O D O D O O D		
	City	State	Zip Code	Transaction ID: C946913		
	<u>Benton</u>	TN	37307-0350	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		1250.00		
	Name of Employer SavaSenior Care	Occupatio Presiden				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		3750.00			
	Other (specify) ▼		0700.00			
ſ				1000.00		
	SUBTOTAL of Receipts This Page (optional)		······	1290.00		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 45 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Health Care Association Pol	itical Action	Committee	
Full Name (Last, First, Middle Initial) Jeffrey Parrish			Date of Receipt
Mailing Address 11156 Sardis-Scotts H	ill Road		07 19 2010
City	State	Zip Code	Transaction ID: C955097
Scotts Hill	TN	38374	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Tennessee Health Manageme-	Occupatio General		
nt Receipt For:		e Year-to-Date	
Primary General Other (specify) ▼	Aggregate	400.00	
Full Name (Last, First, Middle Initial) Wade Peterson	<u> </u>		Date of Receipt
Mailing Address 201 14th Street NW			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C946928
<u>Mandan</u>	ND	58554-2063	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer MedCenter One Care Center	Occupatio Administ		
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Neil L. Pruitt, Jr.			Date of Receipt
Mailing Address 1626 Jeurgens Court			07 02 7 2010
City	State	Zip Code	Transaction ID: C946915
Norcross	GA	30093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer UHS-Pruitt Corporation, Inc.	Occupatio Presiden		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		3750.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1650.00

SCHEDULE A (FEC Foi	·m 3x)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26/45   (check only one)     X
Any information copied from such Re or for commercial purposes, other that	ports and Statements may an using the name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associ	ciation Political Action	Committee	
Full Name (Last, First, Middle Initi Gail Rader	al)		Date of Receipt
Mailing Address 1503 South	Main Street		07 22 2010
City Phillipsburg	State NJ	Zip Code 08865	Transaction ID: C958038  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2500.00
Name of Employer Care Perspectives Inc.	Occupation President		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initi	al)		Date of Receipt
Mailing Address 3308 Ocean # 280	Bld		07 12 YYYYY
City	State	Zip Code	Transaction ID: C948318
Corona Del Mar  FEC ID number of contributing federal political committee.	CA	92625	Amount of Each Receipt this Period  1250.00
Name of Employer SR Management Svcs. Inc.	Occupation CEO	1	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initi Emmett Riner	al)		Date of Receipt
Mailing Address PO Box 391			0 7 1 2 2 0 1 0
City	State	Zip Code	Transaction ID: C952803
Naples FEC ID number of contributing	TX C	75568	Amount of Each Receipt this Period  241.00
federal political committee.  Name of Employer New Boston Health Care Ce-	Occupation	1	_
nter	Administr		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 241.00	
SUBTOTAL of Receipts This Page			3991.00

or for NA Ar Fra Ma Cit Ro FE fee See Fu Jee See Fu Jee See Fu Jee See Fu Jee See Fu Na Es Fu Jee See Fu Jee	commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Health Care Association Pull Name (Last, First, Middle Initial) and Romano ailing Address 61 Summer Street try owley  EC ID number of contributing deral political committee.  The primary General Other (specify) Teceipt For:  Primary General Other (specify) Teceipt For:  All Name (Last, First, Middle Initial) asses Samples ailing Address 110 Association Drest try harleston  EC ID number of contributing deral political committee.  The primary General Other (specify) Teceipt For:  The primary General Other (specify)	Statements may not be sold or used by any personal political committee to solitical Action Committee  State Zip Code MA 01969-1835  C  Occupation CEO  Aggregate Year-to-Date   3750.00	Date of Receipt    Date of Receipt   Date of D
Fu Fu Jee	merican Health Care Association Pour II Name (Last, First, Middle Initial) ank Romano alling Address 61 Summer Street  y owley C ID number of contributing deral political committee.  me of Employer sex Group  ceipt For: Primary General	State Zip Code MA 01969-1835  C Occupation CEO Aggregate Year-to-Date  3750.00	Transaction ID: C946916  Amount of Each Receipt this Period
Cit Ro FE fec Na Es Fu Jee Ma	ank Romano alling Address 61 Summer Street  y bwley  C ID number of contributing leral political committee.  me of Employer sex Group  ceipt For: Primary General	MA 01969-1835  C Occupation CEO Aggregate Year-to-Date ▼	Transaction ID: C946916  Amount of Each Receipt this Period
Cit Ro FE fec Na Es Re Fu Jee Ma	y  owley  C ID number of contributing leral political committee.  me of Employer sex Group  ceipt For: Primary General	MA 01969-1835  C Occupation CEO Aggregate Year-to-Date ▼	Transaction ID: C946916  Amount of Each Receipt this Period
Re Fu Jee	C ID number of contributing leral political committee.  me of Employer sex Group  ceipt For: Primary General	MA 01969-1835  C Occupation CEO Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
Re Fu Jee	C ID number of contributing leral political committee.  me of Employer sex Group  ceipt For: Primary General	C Occupation CEO Aggregate Year-to-Date ▼	
Re Fu Jee Ma	me of Employer sex Group  ceipt For: Primary General	Occupation CEO  Aggregate Year-to-Date   3750.00	1250.00
Fu Jes	ceipt For: Primary General	CEO Aggregate Year-to-Date ▼ 3750.00	1
Fu Jes Ma	Primary General	3750.00	7
. <u>Jes</u> Ma			1
		I	Date of Receipt
Cit	iling Address 110 Association Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State Zip Code	Transaction ID: C946918
<u>Cł</u>	narleston	WV 25311-1217	Amount of Each Receipt this Period
		C	250.00
Na W	me of Employer est Virginia Health Care sociation	Occupation CEO	
	ceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	750.00	
	II Name (Last, First, Middle Initial)		Date of Receipt
	illing Address 9200 Sunset Boulevar # 1100	rd	0 7 0 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	•	State Zip Code	Transaction ID: C946917
	est Hollywood	CA 90069	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C	1250.00
Na SN	me of Employer IF Management/ Windsor	Occupation President/ CEO	
Re	ceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	3750.00	
CITE:	FOTAL of Receipts This Page (optional)		2750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	K         PAGE 28 / 45           (check only one)         11b         11c         12           13         14         15         16						
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		n for the purpose of soliciting contributions solicit contributions from such committee.						
American Health Care Association Pol	litical Action Committee							
Full Name (Last, First, Middle Initial) Michael Scharfenberger		Date of Receipt						
Mailing Address 7265 Kenwood Road # 300		07 19 2010						
City	State Zip Code	Transaction ID: C954078						
Cincinnati	OH 45236-4414	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	137.50						
Name of Employer Nursing Care Management	Occupation Exec Vice President							
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 412.50							
Full Name (Last, First, Middle Initial) Sid Schiff		Date of Receipt						
Mailing Address 220 Sierra Drive		07 26 2010						
City	State Zip Code	Transaction ID: C958027						
North Miami Beach	FL 33179-3855	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	500.00						
Name of Employer Florida Club Care Center	Occupation Administrator							
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00							
Full Name (Last, First, Middle Initial) Shawn Scott		Date of Receipt						
Mailing Address 8106 Boulder Ct.		07 DD / YYYY 07 02 2010						
City Long Grove	State Zip Code IL 60047	Transaction ID: C946919						
FEC ID number of contributing		Amount of Each Receipt this Period						
federal political committee.	C	258.33						
Name of Employer Medline Industries	Occupation VP, Healthcare Corporate							
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 741.66							
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	895.83						

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В.

C.

			FOR LINE NUMBER DAGE 22 / 15
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 45 (check only one)
ITEMIZED RECEIPTS		for each category of the	
THE THE SELL TO		Detailed Summary Page	X 11a 11b 11c 12
A section of the sect			13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	name and ad	y not be sold or used by any personders of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Health Care Association Poli	itical Action	Committee	
Full Name (Last, First, Middle Initial) Robert Siebel			Date of Receipt
Mailing Address 13185 W Great Mounta	ain Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C946920
Lakewood	CO	80228-3512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Carriage Healthcare Compa-	Occupatio Presiden		
nies, Inc. Receipt For:	1	e Year-to-Date ▼	
Primary General	riggrogate		1
Other (specify) ▼	0 0	1500.00	
Full Name (Last, First, Middle Initial) Matthew D. Smyth			Date of Receipt
Mailing Address 2405 I St NW			07 06 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C948405
Washington	DC	20037-2206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.24
Name of Employer American Health Care Asso- ciation	Occupation Director	n of Grassroots	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		307.60	
Full Name (Last, First, Middle Initial) Matthew D. Smyth			Date of Receipt
Mailing Address 2405 I St NW			0 7 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: C960036
Washington	DC	20037-2206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.24
Name of Employer American Health Care Asso- ciation	Occupation Director	n of Grassroots	
Receipt For:		e Year-to-Date ▼	
Primary General	55 -5-		1
Other (specify)	0 0	307.60	
SUBTOTAL of Receipts This Page (optional)			538.48

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 45 (check only one)  X 11a 11b 11c 12 15 16						
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association P	Statements may not be sold or used by any persone name and address of any political committee to							
Full Name (Last, First, Middle Initial) J. Craig Souza Mailing Address 5109 Bur Oak Cir City Raleigh FEC ID number of contributing federal political committee.	State Zip Code NC 27612-3101  C	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
Name of Employer North Carolina Health Care Facilities Receipt For:  Primary  General  Other (specify) ▼	Executive Director  Aggregate Year-to-Date   1100.00							
Full Name (Last, First, Middle Initial) David Stallard  Mailing Address 1305 West Causewa #212 City	y Approach State Zip Code	Date of Receipt  0 7 0 2 2 0 1 0  Transaction ID: C946921						
Mandeville  FEC ID number of contributing federal political committee.  Name of Employer Covington Suites	C Occupation CEO	Amount of Each Receipt this Period  1250.00						
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 3750.00	]						
Brad Stebbins  Mailing Address 600 East Whaley  City	State Zip Code	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y						
Longview FEC ID number of contributing federal political committee.	TX 75601-6525	Amount of Each Receipt this Period  1875.00						
Name of Employer Stebbins Five Companies  Receipt For: Primary General Other (specify)	Occupation Owner  Aggregate Year-to-Date ▼  4375.00	1						
SUBTOTAL of Receipts This Page (optional)		4225.00						

SCHEDULE A (FEC FO	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 45 (check only one)    X
Any information copied from such for for commercial purposes, other to NAME OF COMMITTEE (In Fu American Health Care Ass	han using the name and addre II)	ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle In Jennifer Swim  Mailing Address 8354 Chick	,		Date of Receipt
City Shreveport	State LA	Zip Code 71107	Transaction ID: C952863  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Vivian Health Care Center	C		175.00
Vivian Health Care Center  Receipt For:  Primary General  Other (specify) ▼	Administrat Aggregate Yo	or ear-to-Date ▼ 450.00	
Full Name (Last, First, Middle In Jennifer Swim Mailing Address 8354 Chick	, 		Date of Receipt  0 7 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: C959938
Shreveport	LA	71107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer Vivian Health Care Center	Occupation Administrat	or	
Receipt For: Primary General	Aggregate Yo	ear-to-Date ▼	
Other (specify) ▼	0 0 0	450.00	
Full Name (Last, First, Middle Ir Dixie Taylor-Huff	itial)		Date of Receipt
Mailing Address 932 East B	addour Parkway		07 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Lebanon</u>	State TN	Zip Code 37087-3707	Transaction ID: C946923  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37307 3707	1250.00
Name of Employer Quality Care Health Center	Occupation Administrat	or/Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 3750.00	
	e (optional)		1475.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 45 (check only one)  X 11a 11b 11c 12  13 14 15 16 17						
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
American Health Care Association	n Political Action Committee							
Full Name (Last, First, Middle Initial) Jan Thayer		Date of Receipt						
Mailing Address 2307 Stagecoach	Rd.	07 02 2010						
City	State Zip Code	Transaction ID: C947267						
Grand Island	NE 68801	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	1250.00						
Name of Employer Riverside Lodge Retirement Complex	Occupation Chair/CEO							
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00							
Full Name (Last, First, Middle Initial) Michael Torgan		Date of Receipt						
Mailing Address 5120 West Goldle # 400	af Circle	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City	State Zip Code	Transaction ID: C946924						
Los Angeles	CA 90056-1297	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	250.00						
Name of Employer Country Villa Health Serv- ices	Occupation Vice President, Customer Services							
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00							
Full Name (Last, First, Middle Initial) James Unverferth		Date of Receipt						
Mailing Address 1100 Shawnee Ro	pad	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City	State Zip Code	Transaction ID: C946926						
<u>Lima</u>	OH 45805-3583	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	1250.00						
Name of Employer HCF, Inc.	Occupation President							
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00							
SUBTOTAL of Receipts This Page (option	nal)	2750.00						

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## SCHEDULE A (FEC Form 3X)

PAGE 33 / 45 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Jack Vetter Mailing Address 20220 Harney Street 07 3 0 2010 City State Zip Code Transaction ID: C963628 Elkhorn NE 68022 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 C federal political committee. Name of Employer Vetter Health Services Occupation President Receipt For: Aggregate Year-to-Date Primary General 3750.00 Other (specify) Full Name (Last, First, Middle Initial) William Watson Date of Receipt Mailing Address 1101 Reiger Road 07 12 2010 Apt 605 City State Zip Code Transaction ID: C952804 **Baton Rouge** LA 70809 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Claiborne Healthcare Cent-Occupation Information Requested Receipt For: Aggregate Year-to-Date Primary General

500.00

SUBTOTAL of Receipts This Page (optional)	<u> </u>	1750.00
TOTAL This Period (last page this line number only)	<b>•</b>	52361.33

Other (specify)

IT!	CHEDULE B (FEC Form 3)	' US	e sepa	arate schedule(s)		_		NUMB	ER:			PAGE	34 /	45
11	EMIZED DISBURSEMENTS	S for	each d	category of the Summary Page		Ì	eck onl 21b 27	y one) 22 28a	X	23 28b		24 E	25 29	
	y Information copied from such Reports an for commercial purposes, other than using													5
	NAME OF COMMITTEE (In Full) American Health Care Association													
<u>/</u>	Full Name (Last, First, Middle Initial) BUILDING A MAJORITY PAC (BAM	MPAC)								sburs	: D9			
	Mailing Address P.O.Box 2315							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
	City Baltimore	State MD		Zip Code 21203				Amo	unt of	Each	n Disbu		nt this f	
	Purpose of Disbursement Contributions to Federal PACs							L	_				000.00	)
	Candidate Name Barbara Mikulski					tego Type	ry/							
	Senate President	Disbursement Prim Othe	ary	General ecify) ▼										
	State: District:  Full Name (Last, First, Middle Initial) Chad Causey for Congress							-		-	: D9			
	Mailing Address PO Box 16966							o <sup>M</sup> 7	М /	D 2	23	Υ	ž o i o	) <sup>Y</sup>
	City Jonesboro	State AR		Zip Code 72403-6716				Amo	unt of	Each	n Disbu	ırseme	nt this I	Period
	Purpose of Disbursement Contributions to Federal Candidates					•		L				2	00.00	)
	Candidate Name Chad Causey					tego Type	ry/							
	Senate President	Disbursement Prim Othe	ary	2010 X General ecify) ▼										
	State: AR District: 01  Full Name (Last, First, Middle Initial)  Gardner for Congress										: D9			
	Mailing Address PO BOX 2408							0 <sup>M</sup> 7			23		ž 0 1 (	) <sup>Y</sup>
		State		Zip Code 80539				Amo	unt of	Each	n Disbu	ırseme	nt this I	Perio
	City Loveland	CO	80539											
		CO										3	000.00	)
	Loveland Purpose of Disbursement	CO				tego Type	ry/					3	000.00	)
	Loveland Purpose of Disbursement Contributions to Federal Candidates Candidate Name Cory Gardner	Disbursement X Prim	ary	2010 General		_	ry/	L				3	000.00	)

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBE	R:		P	AGE	35 /	45	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		ck only 21b 27	22 28a	X	23 28b	24 28c	Н	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										3	
NAME OF COMMITTEE (In Full) American Health Care Association Politica	I Action Committee										
Full Name (Last, First, Middle Initial) Gardner for Congress  Mailing Address PO BOX 2408				Date o					0 1 (	) <sup>Y</sup>	
,	State Zip Code CO 80539			Amou	nt of	Each	Disburse	emen	t this I	Perio	d
Purpose of Disbursement Contributions to Federal Candidates Candidate Name		Categor	ry/	L.	•			20	00.00	)	
Cory Gardner  Office Sought: X House Disburse Senate President State: CO District: 04	ement For: 2010 Primary X General Other (specify)	Туре									
Full Name (Last, First, Middle Initial) David Rivera for Congress  Mailing Address PO Box 520633				Date o		sburse	D964 ement	Y Y	0 Ĭ (	) <sup>Y</sup>	
,	State Zip Code FL 33152-0633			Amou	nt of	Each	Disburse	emen	t this I	Perio	d
Purpose of Disbursement Contributions to Federal Candidates Candidate Name David Rivera  Office Sought: X House Disburse	ement For: 2010 Primary General Other (specify)	Categor Type	ry/					50	00.00		
State: FL District: 25  Full Name (Last, First, Middle Initial)  David Rivera for Congress				Trans			D964	41			
Mailing Address PO Box 520633					M /		3	ž	0 1 (	) <sup>Y</sup>	
Miami Purpose of Disbursement Contributions to Federal Candidates Candidate Name David Rivera	State Zip Code FL 33152-0633  ement For: 2010 Primary X General Other (specify)   V	Categor Type	y/	Amou	nt of	Each	Disburse	-	t this I		d
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Friends of Dennis Ross	·			Transaction ID: D96442 Date of Disbursement  O 7
Mailing Address PO Box 73	310			23 2010
City Lakeland	State FL	Zip Code 33807-7310		Amount of Each Disbursement this Peri
Purpose of Disbursement Contributions to Federal Candida	tes			5000.00
Candidate Name Dennis Alan Ross		,	Category/ Type	
Office Sought:  X House Senate President State: FL District: 12	Disbursement For:  X Primary Other (sp	2010 General ecify)		
Full Name (Last, First, Middle Ini COMMITTEE TO ELECT JE	•	E	Transaction ID: D96439 Date of Disbursement	
Mailing Address PO Box 18	379			$ \begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix} $ $ \begin{bmatrix} D & 2 & 3 \\ 2 & 3 \end{bmatrix} $ $ \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Wichita	State KS	Zip Code 67201-1879		Amount of Each Disbursement this Peri
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Candidate Name Jean K Shodorf		,	Category/ Type	
Office Sought:  X House Senate President State: KS District: 04	Disbursement For:  X Primary  Other (sp	2010 General ecify)		
Full Name (Last, First, Middle Ini Jim Renacci for Congress	iial)			Transaction ID: D96433 Date of Disbursement
Mailing Address 150 Smok	erise Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Wadsworth	State OH	Zip Code 44281		Amount of Each Disbursement this Peri
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Candidate Name Mr James B Renacci			Category/ Type	
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<u>/</u>	Full Name (Last, First, Middle Initial) MCCOLLUM FOR CONGRESS				Transaction ID: D95915 Date of Disbursement
	Mailing Address P.O. Box 14131				$\begin{bmatrix}\begin{smallmatrix}M\\07\end{smallmatrix}\end{bmatrix}^M  \begin{smallmatrix}D\\08\end{smallmatrix}\end{bmatrix}^M  \begin{smallmatrix}Y\\2010\end{smallmatrix}$
	City St. Paul	State MN	Zip Code 55114		Amount of Each Disbursement this Period
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	Office Sought:  X House Senate President State: MN District: 04	X Primary Other (spe	General		
	Full Name (Last, First, Middle Initial) FRIENDS OF ERIK PAULSEN				Transaction ID: D95914 Date of Disbursement
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	y Information copied from such Reports and State or commercial purposes, other than using the nar			
$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Politic	al Action Committee		
<u>/</u>	Full Name (Last, First, Middle Initial) TIBERI FOR CONGRESS			Transaction ID: D96425 Date of Disbursement
	Mailing Address 2021 E Dublin Granville	Road		$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & 3 \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Columbus	State Zip Code OH 43229		Amount of Each Disbursement this Period
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	Candidate Name Rep. Patrick J. Tiberi		Category/ Type	
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	Mailing Address PO Box 2000			07
	City Abingdon	State Zip Code VA 24212		Amount of Each Disbursement this Period
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	Candidate Name Rep. Rick Boucher		Category/ Type	
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	State: VA District: 09  Full Name (Last, First, Middle Initial)  KLEIN FOR CONGRESS			Transaction ID: D96432 Date of Disbursement
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	Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS	DAD SUITE 204 State Zip Code FL 33433		Date of Disbursement  O 7
	Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE RO  City BOCA RATON  Purpose of Disbursement Contributions to Federal Candidates	State Zip Code		Date of Disbursement  O 7 D 2 3 Y 2 0 1 0
	Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE RO  City BOCA RATON  Purpose of Disbursement	State Zip Code	Category/ Type	Date of Disbursement  O 7 Page 1 Page 2 Amount of Each Disbursement this Period
	Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE RO  City BOCA RATON  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Ron Klein	State Zip Code	Туре	Date of Disbursement  O 7 D 2 3 Y 2 0 1 0  Amount of Each Disbursement this Period

Madison WI 53701 Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Tammy Baldwin Office Sought:	SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	_	NUMBER: PAGE 42 / 45
NAME OF COMMITTEE (In Full)  Name (Last, First, Middle Initial)  TAMMY BALDWIN FOR CONGRESS  Mailing Address P.O. Box 696  City State Zip Code WI 53701  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tammy Baldwin  Office Sought: X House President State: WI District: 02  Full Name (Last, First, Middle Initial)  Tim WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House Senate President State: MN District: 01  Full Name (Last, First, Middle Initial)  Tim WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State: WI District: 01  Full Name (Last, First, Middle Initial)  Tim WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House President State: MN District: 01  Full Name (Last, First, Middle Initial)  Tim WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House President State: MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House President State: MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House President State: MN District: 01  Disbursement For: 2010  Category' Type  Other (specify) ▼  Type  Transaction ID: D95912  Date of Disbursement ID: D95913  Date of Disbursement ID	TEMIZED DISBURSEMENTS			21b	22 X 23 24 25
AMME OF COMMITTEE (In Full) American Health Care Association Political Action Committee  Full Name (Last, First, Middle Initial) TAMMY BALDWIN FOR CONGRESS  Mailing Address P.O. Box 696  City Madison Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Tammy Baldwin  Office Sought:					
TAMMY BALDWIN FOR CONGRESS  Mailing Address P.O. Box 696  City State Zip Code Madison WI 53701  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tammy Baldwin  Office Sought: House President President State: WI District: 02  Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tamm Walz  Office Sought: New York President State: WI District: 02  Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: House President State: MN District: 01  Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MN 56002  Transaction ID: D95913  Date of Disbursement Disbursement Disbursement For: 2010  Will District: 01  Transaction ID: D95913  Date of Disbursement	NAME OF COMMITTEE (In Full)				
City State Zip Code Wil 53701  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  City State Zip Code Wil 53701  Purpose of Disbursement For: 2010  X Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  TilM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Xip Code MN 56002  Purpose of Disbursement For: 2010  Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House Senate President State: MN District: 01  Full Name (Last, First, Middle Initial)  Tim Walz For Use Condidates  Candidate Name Rep. Tim Walz  Office Sought: X House Senate President Primary Senate President Senate President Primary Senate President Primary Senate President Primary Senate President Other (specify) ▼	Full Name (Last, First, Middle Initial)				Transaction ID: D96423
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Madison WI 53701  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tammy Baldwin  Office Sought:	Mailing Address P.O. Box 696				077 23 2010
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Full Name (Last, First, Middle Initial)  Tilm WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Cardidate Name Rep. Tim Walz President State: MN District: 01  City MANKATO Senate President State: MN District: 01  Full Name (Last, First, Middle Initial)  Transaction ID: D95912  Date of Disbursement  O 7	Senate	Primary	General		
TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City State Zip Code MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House Senate President State: MN District: 01  Full Name (Last, First, Middle Initial)  TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City MANKATO MN 56002  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House State Zip Code MANKATO MN 56002  City MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House Senate Primary X General Other (specify) ▼  State: MN District: 01  Disbursement For: 2010 Category/ Type  Other (specify) ▼  State: MN District: 01	State: WI District: 02		,, <b>\</b>		
City MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought: X House President State: MN District: 01  Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS  Mailing Address PO BOX 938  City MANKATO MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Other (specify) ▼  Transaction ID: D95913  Date of Disbursement  0 7 M 0 8 / 2 0 1 0 √  Amount of Each Disbursement this Permany Denies of Disbursement this Permany Denies of Disbursement this Permany Disbursement Contributions to Federal Candidates  Candidate Name Possibent Disbursement For: 2010  City State Zip Code MN 56002  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Possibent Disbursement For: 2010  President Disbursement For: 2010  Office Sought: X House Primary X General Other (specify) ▼  State: MN District: 01	,				
MANKATO  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Tim Walz  Office Sought:  State: MN  District: 01  Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS  Mailing Address  PO BOX 938  City MANKATO  Purpose of Disbursement Contributions to Federal Candidates  Category/ Type  Transaction ID: D95913 Date of Disbursement  Office Sought:  MN  State  Zip Code MN  State  MN  S6002  Amount of Each Disbursement this Per  Amount of Each Disbursement this Per  Category/ Type  Office Sought:  X House Senate Primary Rep. Tim Walz  Office Sought:  X House Senate President State: MN  District: 01  Disbursement For:  2010 Category/ Type  Amount of Each Disbursement this Per  Category/ Type  Other (specify) ▼  Other (specify) ▼  Other (specify) ▼  Other (specify) ▼	Mailing Address PO BOX 938				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 0 & 0 \\ 0 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 1 & 0 \\ 2 & 0 & 1 & 0 \end{bmatrix}$
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OI I	1 1	the name and address of any political c	Ommittee to so	mich contributions from such committee
	NAME OF COMMITTEE (In Full)			
/	American Health Care Association	Political Action Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: D96424
	JON KYL FOR U S SENATE			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address PO BOX 10246			07
	City	State Zip Code		Amount of Each Disbursement this Period
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$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Polit	ical Action Committee		
	Full Name (Last, First, Middle Initial) Mary Shabo  Mailing Address 67 Cascade Road			Transaction ID: D96683  Date of Disbursement  O 7 O 3 1 O 2 0 1 0
	City Old Orchard Beach	State Zip Code ME 04064		Amount of Each Disbursement this Period
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